

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

110	ت کے	''/	')			
OMB APPROVAL						
MB Num			-0076			
Expires:	April	30,20	300			
Expires: April 30,2008 Estimated average burden						
nours per response 16.00						

SEC USE ONLY						
Profix	Serial					
DATE RECEIVED						
1	1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) SPARE BACKUP, INC.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ ULOE
Type of Fining.	A STATE OF THE PARTY OF THE PAR
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	07067997
SPARE BACKUP, INC.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
72-757 FRED WARING DRIVE, PALM DESERT, CA 92260 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	(760) 779-0251 Telephone Number (Including Area Code)
(if different from Executive Offices)	receptione Number (including Area Code)
Brief Description of Business	PROCESSED
THE COMPANY PROVIDES SOFTWARE FOR AUTOMATED REMOTE BACKUP FOR PC IMPROVE REMOTE COMMUNICATIONS.	S AND WEB-BASED PRODUCTS TO
Type of Business Organization Corporation Ilimited partnership, already formed business trust Ilimited partnership, to be formed	lease specify): THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	THOMSON
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	FINANCIAI - 7
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20.	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supple not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

		A. BASIC IDE	NTIFICATION DATA						
2. Enter the information requested for the following:									
 Each promoter of th 	• Each promoter of the issuer, if the issuer has been organized within the past five years;								
 Each beneficial own 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer								
 Each executive office 	er and director of	f corporate issuers and of o	corporate general and man	aging partners of p	artnership issuers; and				
 Each general and ma 	anaging partner of	f partnership issuers.							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner				
Full Name (Last name first, if PERLE, CERY B.	individual)								
Business or Residence Address 72-757 FRED WARING D	•	•	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if HAGAN, EDWARD L.	individual)								
Business or Residence Address 72-757 FRED WARING DF		-	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if GALTERIO, RICHARD	individual)								
Business or Residence Address 72-757 FRED WARING DR			de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co-	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Street, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Street, City, State, Zip Co.	de)						
	(Lice blan	nk chaet or conv and uce o	additional conies of this sl	heet as necessary)					

					В. П	NFORMATI	ON ABOU	T OFFERI	NG				
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No 🔀					
2.								\$ 50,000.00					
	what is the minimum investment that will be accepted from any morvidual:							Yes	No				
3.		-	permit join		•							R	
4.	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ere than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in tl EC and/or	irectly, any he offering. with a state ons of such		
	l Name (OT APPL		first, if indi	ividual)									
_			Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						
		2 . 15											
Nai	me of Ass	sociated Bi	oker or De	aler									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)				•••••				l States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)			1 1 1111						
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	••••••			***************************************			☐ All States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)	-								
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								☐ Al	l States				
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	S	
	Common Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests		· · · · · · · · · · · · · · · · · · ·
	Other (Specify UNITS COMMON STOCK AND WARRANTS		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$_650,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$
	Total	_	s 0.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$2,500,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees]\$. [] S
	Purchase of real estate]\$	\$
	Purchase, rental or leasing and installation of mac and equipment	hinery [\$
	Construction or leasing of plant buildings and faci	ilities] \$. 🗆 s
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another]\$. 🗆 \$
	Repayment of indebtedness]\$	\$
	Working capital		\$. Z \$ 2,500,000.00
	Other (specify):] s	. [] \$
		[]\$	s
	Column Totals		\$_0.00	Z \$ 2,500,000.00
	Total Payments Listed (column totals added)			
Г		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	ion, upon writte	tle 505, the following on request of its staff,
Issu	er (Print or Type)	Signature D	Pate	
SF	ARE BACKUP, INC.		June	6.2007
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	U	
CEF	RY B. PERLE	CHIEF EXECUTIVE OFFICER		

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)